## County of San Diego

# San Diego Health and Human Services Agency

Client Services Improvement Project

Summary of Findings & Recommendations



# SUMMARY OF ASSESSMENT FINDINGS

#### Summary of Assessment Findings

#### **Summary of Findings:**

- Clients do want to use ACCESS call center due to convenience and quality of service.
- San Diego County is delivering a simple and accessible customer experience by way of the "no wrong door" policy and multiple access points however many challenges exist.
- ACCESS
  - Insufficient trunking resulting in 350,000+ hang-ups per month
  - Call service levels are low; 24% abandonment of call and average wait time of +30 minutes
  - Staffing levels are not sufficient to handle current or projected "should be" call volumes- between 20% and 35% below required to handle call volumes within acceptable service levels
  - Technology does not support an efficient flow of work within ACCESS and between ACCESS and FRCs
- Family Resource Center (FRC)
  - Clients are unintentionally encouraged to walk into FRC "All roads lead to the FRC"
  - There is no centralized and robust task tracking tool: Each FRC and each task unit within the FRC have 'home grown' tracking tools that are all Excel based
  - Lobby Lines are long, directions are confusing, there is no automated check in,
     EW notification or auto receipts of documents

### Summary of Assessment Findings



- Operational processes require <u>too many hand offs</u> to effectively offer the customer either:
  - 1<sup>st</sup> call resolution; Sharepoint hand off to FRCs (16.5%), 211 transfers back to ACCESS
  - 'No Wrong Door' process to clients but work still transferred by zip code between FRCs
- Imaging delay and receipt requirements at the FRC encourage clients to call, email and return visit to an FRC
- Organization is not prepared for the online application processing and remote benefits issuance
  - Online applications (BCW) and IVR self service is not well publicized and slower operational processes make this a less desirable channel for customers
  - Phone interviews not currently the default method for conducting CalFresh Intake, RRRs or CalWORKs RRR interviews
- There is no evidence of a joint technical plan to support the current service delivery model, operational needs of ACCESS or the FRC's or requirements of a future 'online' service delivery model. Technology solutions are insufficient for the size of HHSA and not pro-actively anticipating the needs of the organization.

## High Level Recommendations

### Summary – High Level Recommendations

#### **Customer Experience:**

1. Re-allocate resources to eliminate operational hand offs; connect process and technology stand alone initiatives into a single view of the desired customer experience

#### **Technology:**

- 1. Install additional phone lines/trunks (along with staff requirements) to receive all client calls
- 2. Implement a task management tool across ACCESS and FRCs
- 3. Implement document imaging at the point of entry
- 4. Implement other call center related technologies to improve the client experience: lobby management kiosks, email management, workforce management for phone staff scheduling

#### **Operations:**

- 1. Increase and allocate staff to support these recommendations.
- 2. Migrate work force to flexible work assignments based on customer need vs. task specialization. Phone support staff will do tasks 30% of available time, call handling 70% of time.
- 3. Revise processes to minimize customer hand offs: e.g. Sharepoint requests, 211 transfers back to ACCESS, zip code allocation of work, BCW applications into task distribution process assigned across all offices
- 4. Streamline operational reporting to clarify the customer experience and variables impacting that experience; resources, volume of work, channel of access and predictive analytics
- 5. Drive customer behaviors towards non face to face channels (phone, email, web.) Staff and build processes to support non face to face channels; simple phone interviews and standardized application processing regardless of channel.
- 6. Improve in person experience in FRC lobbies by adding self-help technologies, improving overall lobby flow and customer interaction with lobby signage, staff and technology.
- 7. Migrate Intake process to full task model with interviews scheduled centrally and assigned as tasks; emphasis on inbound/outbound <u>phone</u> interviews for CalFresh applications and CalWORKs & CalFresh RRRs County of San Diego HHSA Client Services Improvement Project-STRATEGY & PLAN

#### Quick Wins- 2012

#### Phases in 2012

#### **Starting March 2012**

- ~ 50 HSS released to ACCESS Center for phone coverage from training resulting in 109 staff on phones at ACCESS on phones 100% of time
- Improve Supervisor oversight and communication
  - Lower cubicle walls allowing improved line of sight for oversight
  - Noise reduction in call handling areas
- Implement process changes to lower call handle time;
  - Standard opening and closing
  - Set individual goals for talk time, focus on the the highest talk time individuals
  - Monitor and deliverable coaching feedback specific to talk time
- Results: Reduced call answer time

#### **Starting May 2012**

- Open phone trunks (+50) to increase capacity
- Call handle time average lowered to 11 minutes
- **Results:** Increase calls to ACCESS by 30% (based on calls/case ratios from other service center counties). Call answer time will increase during this transition period as staff continue to ramp in skills.

#### Summary of Recommendations:

#### Current vs. Future State Changes

Recommended/Future
<ul> <li>Increase phone staff FTE to 110</li> <li>Increase phone lines (trunks) to 192-226 (depends on use for interviews)</li> <li>Reduce average (80%) client wait time at ACCESS to 60 seconds</li> <li>Eliminate busy message; answer approximately 56,028 calls live</li> </ul>
•ACCESS staffed to also handled allocated tasks, 70% phone, 30% task (45 FTE) •Staff specialization minimized; work assigned across all offices to staff using Task Management Tool based on client need •Process built to reduce hand offs- •Eliminate Sharepoint tasks •BCW apps processed as task; all apps processed the same regardless of channel received •Imaging at FRC's-eliminate lag time in process •Phone interviews become the standard for CalFresh Intake and Renewals/Recertifications/Redeterminations and CalWORKs Renewals/Recertifications/Redeterminations, with inbound phone call an option to reduce appointment re-scheduling
Universal task management tool built (custom) to allocate tasks to next available worker.  Documents imaged when and where they are received.  Workload supported by technology to improve customer experience, staff efficiency and management visibility:  •Automated email management •Universal task management •Kiosks and lobby management software •Workforce management tool  HHSA Client Services Improvement Project- STRATEGY & PLAN